

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90353 025 ***150.00

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1. Entity Name
GARRATT-CALLAHAN COMPANY



Principal Place of Business
**50 INGOLD RD
BURLINGAME, CA 94010**

Mailing Address
**50 INGOLD RD
BURLINGAME, CA 94010**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03202006

Chg-P

CR2E034 (11/05)

4. FEI Number
94-0497430

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**LIVINGSTON, GERGORY
416 WILL BARBER RD
KISSIMMEE, FL 34744**

7. Name and Address of New Registered Agent

Name **Donald West**

Street Address (P.O. Box Number is Not Acceptable)

14706 Bensbrook Dr.

City **Spring Hill**

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Donald West**

Signature, typed or printed name of registered agent, and title if applicable.

Donald West

(NOTE: Registered Agent signature required when reinstating)

3/22/06

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **GARRATT, JEFFREY**
STREET ADDRESS **111 ROLLINS RD**
CITY-ST-ZIP **MILLBRAE, CA**

TITLE **CEOD** ☐ Delete
NAME **GARRATT, LORE LEI**
STREET ADDRESS **13721 WELCH ROAD**
CITY-ST-ZIP **DALLAS, TX**

TITLE **SD** ☐ Delete
NAME **MELNICK, D.H..**
STREET ADDRESS **333 MARKET STREET**
CITY-ST-ZIP **SAN FRANCISCO, CA**

TITLE **D** ☐ Delete
NAME **GARRATT, M.W. III**
STREET ADDRESS **111 ROLLINS ROAD**
CITY-ST-ZIP **MILLBRAE, CA**

TITLE **D** ☐ Delete
NAME **GARRATT, MATTHWEW**
STREET ADDRESS **4545 COMMERCE CR SW**
CITY-ST-ZIP **ATLANTA, GA**

TITLE **TD** ☐ Delete
NAME **COLVIN, MATTHEW**
STREET ADDRESS **11 ROLLINS ROAD**
CITY-ST-ZIP **MILLBRAE, CA 94030**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Matthew J. Callahan** CFO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/22/06 650-697-5811

Date Daytime Phone #